## 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Its Now or Never Inc.	C C00519785
Check If 24-hour report 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	Date
Kevin D. Loranger	10 29 2012
Mailing Address 505 N Rochester St	Amount
City State Zip Code	2000.00
Waterford WI 53185-5704	Transaction ID : 21029.E56
	Sought: House State: ND  Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———
THOINING A BENC	C One: Support Oppose
Calendar Year-To-Date Per Election 9958.84 Disbut 2012	rsement For: Primary General  Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date M M / D D / Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure  Category/ Type  Office	Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President
Check	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	2000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Anthony J. Ferate [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	